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Ophthalmic Literature

VOL. III. AUGUST, 1913. NO. 8.

Edited by EDWARD JACKSON. Assisted by WILLIAM H. CRISP.

A MASTER STILL TEACHES.

By his authoritative history of ophthalmology, his collections of books and other publications relating to it, and his catalogue of such collections, which itself covers 434 pages, Julius Hirschberg has won an unique place among those who have served the ophthalmologist through his literature. This is quite apart from his conduct of a valuable journal, the **Centralblatt für Praktische Augenheilkunde**, for thirty-seven years, and the enormous number of papers he has published, covering the widest range of ophthalmic and historic subjects. On the 18th of September, the seventieth anniversary of Hirschberg's birth, any one interested in the literature of ophthalmology may well give some thought to the achievements of his busy life and the services he has rendered to his own patients and the far wider circles of the patients of his students and readers.

To the ophthalmologist who is ambitious to leave some impress of his own on the literature of his specialty, who wishes to contribute something to the general stock of scientific knowledge, the following brief summary of Hirschberg's literary development, told in a footnote to the preface of the volume which celebrates his seventieth lifetime of experience as author, editor and wide and constant reader. It outlines briefly the progress of one who mastered the problems of literary expression and points the way to anyone who would achieve skill in literary workmanship.

Hirschberg writes of his style that it "shows three periods—first, the ornate style of youth, developed in school and accentuated by the stately literary language of my esteemed teacher, Albrecht von Graefe; then comes, under the influence of Lessing's prose writings, a simpler and closer mode of expression, till finally, about 1885, the conviction was reached that also for the physician the most advantageous vehicle of thought expression is his accurately-used mother-tongue, freed as far as possible from superfluous foreign words."

INEXCUSABLE ERRORS.

In the June number we referred to misspellings of author's names which had appeared in a French ophthalmic journal. Examples of such errors are occasionally found in any of the periodicals of our specialty, not excepting those which are notable for the general excellence of their editing. It is too much to expect that all editors should possess the linguistic knowledge and instinct ,as well as the wide familiarity with ophthalmologic bibliography which are required for the prompt detection of slight irregularities of this kind. They become inexcusable only when habitual or very frequent.

But there are other errors which should be eliminated by careful proofreading; and which, when they occur frequently, cannot be lightly excused. In these days of hurried press work, the most careful may

let some error escape his notice. But in some journals mistakes occur in such profusion as to suggest that the duties of their editors are limited to accepting literary contributions and forwarding them, with practically no supervision, to the printing establishment. Badly prepared manuscripts can excuse many errors on the part of the non-medical compositor. But the proof of such manuscripts should always be carefully scanned by the editor who has accepted them, if he does not wish his journal to become a laughing-stock.

It does not take very close observation to detect the distortion of "canaliculus" into "coniculus." Again it is difficult to understand how a case report occupying a single page can be allowed to carry two such errors as "cholagion" for "chalazion," and the statement that a patient who had been gored by a cow's horn had a regular "cowboma" of the iris. Another remarkable sentence reads: "The patient was a robust woman with nothing negative in her history either congenital or acquired." If loose composition is permissible anywhere it is perhaps in brief reports of society proceedings; yet the following surely transcends what should be permitted to appear in any publication: "Above the macular ares there was a typic and classic. Leber spots in every particular a moderate film of haziness surrounded the entire stillate spot."

If an article contains quotations from a foreign language it is desirable to make the quotation as correct as if it were in the author's own tongue. In quoting from the French it is better to omit accents altogether than to blunder by making them all of one kind. About two years ago some rather extensive quotations from French literature, contained in an article on the intracapsular operation for cataract were so grossly misspelled and otherwise distorted as to call forth decidedly sarcastic criticism from the Parisian editor of the original.

There are, of course, good editors and bad. It is perhaps not improper to suggest that several of our American eye journals are capable of considerable improvement in this respect. In one of them, from which some of the instances in these paragraphs are taken, the editor's work of supervision is often so little in evidence as to suggest the application to him of Elijah's ironical reference to the god Baal: "Either he is talking, or he is pursuing, or he is in a journey, or peradventure he sleepeth, and must be awaked." W. H. C.

BOOK NOTICES.

THE ROYAL LONDON OPHTHALMIC HOSPITAL REPORTS, Vol. XIX, Part I, July, 1913. Edited by J. Herbert Parsons. Illustrated. London, J. and A. Churchill, 7 Great Marlborough Street. Price per volume, 15 shillings.

One main object of OPHTHALMIC LITERATURE is to awaken in its readers a more active interest in the literature of their specialty. Probably no publication in the language is more worthy of their attention than the Royal London Ophthalmic Hospital Reports. These have sustained a high scientific and practical standard since their first appearance in 1857. They appear in paper-covered parts, three of which usually constitute a volume of about four hundred pages. The parts

are issued at variable intervals, as material of the desired quality is prepared for publication. In its fifty-six years eighteen volumes have been completed, and each volume contains articles that will always be regarded as classics.

The present number opens with a sketch of Thomas Young; then follows an article by Nettleship and Hudson, in which are collected a large number of cases of blindness occurring in the lower animals, which tend to throw light on questions regarding hereditary disease and toxic amaurosis in cattle, horses and other domestic animals. Mr. Lawford gives a note on hereditary primary glaucoma, and George Coats contributes three of his important papers on retinal pathology, dealing chiefly with obstruction of the central retinal artery and its effects. Hudson briefly describes the method of cataloging museum specimens now in use in the hospital and publishes a clinical lecture on cataract extraction with peripheral iridectomy. Moxon publishes and discusses statistics on the treatment of school children under the London County Council, and Mr. Parsons continues his scientific discussion of the perception of a luminous point. This part contains 122 pages. It may be obtained alone, but at a price one-half that of the whole volume.

There is no reason except ignorance and lack of interest in the branch of medicine we undertake to practice, why this publication should not have ten times as many readers; and, for the promotion of the scientific development and efficiency of English-speaking ophthalmologists, there is every reason that it should have such an increased circulation. Here is a publication in our own language ranking with the best in either French or German; probably ranking higher in average value than some of the great periodical publications that we revere so much because we have known so little about them. It has failed to achieve the recognition it deserves, partly because it has never been forced on our notice by the voluble agent of publishers more interested in growing rich from their ventures than in working for the scientific development of the medical profession.

Hirschberg, J. JULIUS HIRSCHBERG'S AUSGEWAHLTE ABHANDLUNGEN (1868-1912) Zu Seinem 70. Geburtstage Ihm Uberreicht im Namen Seiner Schüler von Oscar Fehr und Wilhelm Mühsam. 8vo., 864 pages, with portrait and 198 illustrations. Leipzig: Veit and Company.

These "selected treatises" of Hirschberg, chosen and presented to him in the name of his scholars, by Fehr and Mühsam, in commemoration of his seventieth birthday, constitute a new and quite admirable form of Festschrift. The departure was justified by the fact that nine years ago in celebration of his twenty-fifth year as professor, a volume had been issued including contributions from more than twenty of the most eminent of his former pupils. Probably from the writings of no other living ophthalmologist could selections have been made of such wide interest to those engaged in ophthalmic practice.

The table of contents shows 182 different papers, embracing a great variety of subjects. These are arranged under three headings: I, The Visual Organs in General Diseases; II, Eye Operations, and, III, Eye Diseases in General and Their Treatment. The latter occupy more than one-half the book and embrace reports of a great number of carefully observed clinical cases. In the first part syphilis occupies the most space, ninety-three pages; but the papers on the ocular lesions of diabetes are especially important and interesting. In the second part one naturally turns to the accounts of magnet extraction, which run from the report of the first case in which the fragment of iron was removed through an incision in the sclera, to the accounts of the simplified sideroscope, and his new room especially fitted up for magnet operations, double perforations and the general statistical summaries of results, nineteen titles in all. In the third part the field covered is too wide to attempt any review. The period of fifty-four years of

reported experience has given rare opportunity for the observation of late resuits of operation and treatment and progressive development of professional judgment. The subscribers to this birthday memorial are to be congratulated on what they have made possible and have obtained. The general literature of ophthalmology and the library of each subscriber are distinctly the better for this volume.

Lagleyze, E., Buenos Aires. DU STRABISME. 8vo., 409 pages. Paris, J. Rousset.

This is a report of studies on the etiology, pathogenesis, mechanism and treatment of strabismus, based upon an experience of twenty years, including 3,791 cases, of which 22 per cent required operation. The author has tried to reach conclusions from his own experience, unbiased by the views of his predecessors. He finds that in about 1 per cent of cases there is spontaneous recovery. In convergent strabismus the larger proportion have hyperopia of 3 to 6 D. In divergent strabismus myopia seemed to become stationary at about 6 D. This book is the most important statistical contribution to our clinical knowledge of squint that has been published for several years.

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Abstracts From Foreign Journals

Asmus, E., Exact Measurements in Advancement of Ocular Muscles. (Zeitschrift für Augenheilkunde, XXIX, pp. 422 and 515.)

Two series of cases of divergent squint observed by the author showed percentages of 21 and 23.2, respectively, due to tenotomy of the internus. He now favors advancement of the antagonist, combined, if necessary, with a tenotomy so executed as not to damage the capsule of Tenon. The amount of advancement required is determined by measurement with calipers, upon the basis of the equivalent in millimeters of the angle of deviation. Of forty-nine cases tested, actual stereoscopic vision was obtained in 30 per cent; 30 per cent more had somewhat uncertain stereoscopic vision. Marginal ulceration of the cornea occurred in two cases, being apparently due to avoidable accidents.

It is suggested that tables, based upon extensive operative material, and showing the various types of squint, grouped for every additional 10 degrees, would be valuable as guides in estimating the amount of advancement required for the correction of future cases. To this end the writer offers an elaborate tabulation of his own cases. Ten measured cases of monocular convergent strabismus, treated by bilateral advancement, were advanced an average of 4.5 times the divergence. Of twelve cases so treated, eight became normal, one of them after a secondary conservative tenotomy. The other four were improved, but needed later tenotomy. Two cases of the same condition were treated by monolateral advancement, averaging in millimeters about four times the squint. One of these, which fixed with either eye, gave a good result, while the outcome in a case in which the squinting eye did not fix was unsatisfactory. Three measured cases of monocular convergent strabismus were treated by bilateral advancement, averaging four times the squint, unilateral tenotomy being done at the same time. Two of these required subsequent tenotomy in the second eye.

Thirty-five cases of monocular convergent strabismus were treated by tenotomy with advancement in the squinting eye. Thirty-three of these were measured, the average advancement measuring three times the squint. Thirty-two patients obtained normal position. None of the thirty-five cases developed a divergence, and it is important to remember that in every case in which there was persistence of actual or latent convergence, the second eye was still available for operation.

Four cases of alternating convergent strabismus were treated by bilateral advancement without tenotomy. The average squint angle was 31.5 degrees, and normal position was obtained by an average advancement of 4.8 times the amount of convergence in millimeters. A patient with alternating convergent strabismus of 40 degrees, at 22 years of age, underwent a monolateral advancement, the intention be-

ing later to repeat the operation on the second eye. The angle of squint was equivalent to 8.8 mm., and the single advancement was 19 mm. The cosmetic result of the single operation proved so satisfactory that no further operation was done. In connection with this case emphasis is laid on the fact that where the squint angle is great a smaller multiple suffices in estimating the advancement required than with a lesser angle. Similarly, of two cases of alternating strabismus treated by tenotomy and advancement on one side, a squint angle of 32 degrees was corrected by a multiple of 2.5, and an angle of 18 degrees by a multiple of 3.3. A man of 44 years, with an alternating convergent strabismus of 48 degrees, developed 21 degrees of divergence after bilateral advancement and monolateral tenotomy, the multiple of which was 3.1 the squint. An excessive effect was also obtained in a case of 36 degrees convergence in which the advancement and tenotomy were equivalent to 3.1 times the squint. On the other hand, a girl of 11 years, with 40 degrees of convergent strabismus affecting the right eye, obtained normal position from a threefold multiplication of the deviation, by way of tenotomy and advancement done first on the squinting, and at a second sitting on the straight eye. In the cases of alternating convergence the best results were generally obtained from bilateral advancement, preferably without tenotomy.

In nine out of ten cases of monocular divergent strabismus, treated by unilateral tenotomy and advancement, the results were very good. The nine cases that were measured showed an average operative multiple of 2.5. A case of alternating divergent strabismus again illustrated the fact that a small squint angle calls for greater multiplication of the linear deviation. In this case the latter amounted to 1.76 mm., corresponding to 8 degrees, and was corrected by unilateral advancement of 9.5 mm., or 5.5 times the deviation. Of four cases of convergence insufficiency, three were treated by bilateral advancement of the tendon to the limbus, without an over-effect being produced. In one of them tenotomy was later necessary, and in another tenotomy had already been done.

The technique adopted, and the results obtained, in seven cases of artificial divergent strabismus (secondary to tenotomy of the internus) are described in some detail.

Yamaguchi, H., Xanthopsia from Santonin. (Klinische Monatsbl. für Augenheilkunde, 1913, July, p. 46.)

The round worm is widely distributed in Japan. When its presence is suspected it is the custom to take a mixture called semengan, containing 0.1 gm. of santonin, in two powders. A man of 38 years, who had often had xanthopsia lasting almost a day, on September 1 took semengan morning and evening. Feeling no better that evening, he was given santonin by a physician, and passed worms. The next day he had yellow vision, of which he took no notice and which soon disappeared from the left eye. The persistence in the right eye was particularly marked in the middle of the field. When he came to the hospital on September 25, the vision of the right eye with correcting lens was 0.5, there was slight clouding of the vitreous, the macular retina was hyperemic, and vision was cloudy. There was no notable change in the left eye. He was treated with potassium iodide, cathartics and sudorifics, and put to rest. The first improvement in the xanthopsia and visual acuity was on October 3. The xanthopsia finally disappeared on October 9, having thus lasted the extraordinary period of thirty-seven days. The maximum dose of santonin is 0.1 gm., or 0.3 gm. per diem. The patient had only taken on the first day 0.1 gm. and in the next four days at most 0.4 gm.

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